

DOCKET NO. SC12295ZK

RECEIVED. CENTRAL FAX CENTER

NOV 0 5 2004

Freescale Semiconductor, Inc.

Law Department 7700 W. Parmer Lane MD: TX32/PL02

Austin, TX 78729 Telephone: (5

(512) 996-6839

Facsimile:

(512) 996-6854

14

Number of Pages (including this page)

5 6

Date:

November 2, 2004

To:

Dilinh P. Nguyen - 2814

Location:

United States Patent and Trademark Office

Fax No.:

(703) 872-9306

From:

David G. Dolezal - 41,711

Subject:

10/660,828- Gary G. Li

NOTICE: This facsimile transmission may contain information that is confidential, privileged, or exempt from disclosure under applicable law. It is intended only for the person to whom it is addressed. Unauthorized use, disclosure, copying or distribution may expose you to tegal liability. If you have received this transmission in error, please immediately notify us by telephone (collect) to arrange for return of the documents received and any copies made. Thank you.

MESSAGE:

Enclosed herewith, please find a FORMAL AMENDMENT for filing in the below-identified application.

1. x 1 page Facsimile Cover Sheet

x 11 page Amendment
 X 1 page Fee Transmittal (In duplicate)

Pald by Deposit Account: 503079

\$194

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING FACSIMILE TRANSMITTED TO THE PATENT AND TRADEMARK OFFICE:

ON: 11/5/4 4

Elaine Cas

Signature

PLEASE GIVE THESE PAPERS TO:

EXAMINER: Dilinh P. Nguyen GROUP ART UNIT: 2814 SERIAL NO.: 10/660,828 FILED: SEPTEMBER 12, 2003 INVENTOR: GARY G. LI

DOCKET NO. SC12295ZK

RECEIVED **CENTRAL FAX CENTER**

UNITED STATES PATENT AND TRADEMARK OFFICE

NOV 0 5 2004

APPLICANT(S)

Gary G. Li

GROUP ART UNIT:

2814

APPLN. NO.:

10/660,828

EXAMINER: Dilinh P. Nguyen

FILED:

September 12, 2003

TITLE:

LEAD FRAME WITH FLAG SUPPORT STRUCTURE

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office.

Signature

Elaine Cox

Printed Name of Person Signing Certificate

<u>AMENDMENT</u>

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action dated August 11, 2004, and Examiner's comments with regard thereto, please enter the following amendments in the above-entitled application, without prejudice or disclaimer.

If Applicant has overlooked any additional fees, or if any overpayment has been made, the Commissioner is hereby authorized to credit or debit Deposit Account 503079.

		Complete if Known						
FEE		Application Nu	10/660,828					
TRANSMITTAL		Filing Date		September 12, 2003				
Patent fees are subject to annual revision		First Named In	Gary G. Li					
Applicant claims small entity status. See 37 CFR 1.27		Examiner Nam	Dilinh P. Nguyen					
	Group Art Unit 2814							
TOTAL AMOUNT OF PAYMENT	Attorney Docket No. SC12295ZK							
METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)					
			3. ADDITIONAL FEES					
Check Credit card Money Order Other None			Large Small					
. X Deposit Account:			Ent		En			
Daposit Account Number	503079		Fee	Fee	Fee .	Fee		
Deposit Account Name	FREESCALE SEMICONDUCTOR	.)	Code	(5)	Code	(\$)	Fee Description	
	}							
The Director is authorized to: (check all that apply)			1051	150	2051 2052	65 25	Surcharge – late filing fee or call: Surcharge – tate Provisional filing	-
Charge fee(s) indicated below Credit any overpayments			1052 1053	60 1 30	1063	130	Non-English spedfication	
Charge any additional fee(s) during the pendency of this application			1812	2520	1812	2520	For filing a request for ex parte Regramination	
Charge focs(s) indicated below, except for the filing fee to the			1804	820*	1804	920	Requesting publication of SIR prior to	
above-identified deposit account.			1805	1840*	1806	1840*	Examiner action Requesting publication of SIR after	
FCC 041	SIN ATION		1251	110	2251	65	Exeminer action Extension for raply within first month	
FEE CAL	CULATION		1252	430	2252	215	Extension for repty within second munith	
			1253	980	2253	490	Edension for reply within third month	
1. BASIC FILING FEE			1254	1590	2254	765	Expresion for reply within learth meath	
			1255	2080	2255	1040	Extension for repty within (1th month	
Large Entity Small Entity	•		1401	340	2401	170	Notice of Appeal	
Fee Fee Fee	-	na Palid	1402	340 800	2402 2403	170 160	Filing a brief in support of an appeal Request for oral hearing	
Code (\$) Code (\$)		H PMU	1440	5 W			Petton to institute a public use	
	4 N. W. 19		1451	1510	1451	1510	proceeding Petition to revive – unavoldable	<u>,</u>
1001 790 2001 395	Utility filling fee		1452 1453	110 1870	2452 2453	55 685	Pefilion to revive – unintentional	
1002 300 2002 175 1003 550 2003 <i>2</i> 75	Design filing fee Plant Ming fee	 ·	1501	1970	2501	585	Utility Issue (ee (or reinsue)	
1004 790 2004 395	Raissuo filing fee	- 	1502	490	2502	245	Design issue fee	
1005 160 2005 80	Provisional filing lee		1503	660	2503	330	Plant issue fee	
			1460 1807	130 60	1460 1807	130 50	Petitions to the Commissioner Processing fee under 37 CFR 1.17(g)	
	SUBTOTAL (1) (5)		1806	180	1806	160	Submission of IDS	
2. EXTRA CLAIM FEES Previously	Extra Fee from		6021	40	8021	40	Recording each patent assignment	
P ad••	Claims below	Fee Paid					per property (times number of properties)	
Total Calms 33 · 20	= 32 X 18	18	1909	790	2809	395	Filing a submission after tinal rejection (57 CFR § 1.129(a))	
Independent Claims 5 - 3	- 3 × 68	= 176	1810	790	2810	395	For each additional invention to be	
Multiple Dependent	300	=	,,,,		0001	≈ 0E	examined (37 CFR § 1.129(b))	[
Large Entity Small Entity Fee Fee Fee Fee			1801	790	2601	395	Regulaci for Continued Examination (RCE)	
Cods (\$) Cods (\$)	Fee Description	on.	1802	900	1802	900	Request for expedited examination of a design application	
	alms in excess of 20 dependent claims in excess of 3		Other fee	(apacily)			•	
1203 300 2203 150 Mi	ultiple dependent claim, if not pa	<u>.</u> ¢					* 1 y #	
1204 68 2204 44 1	Relasue Independent claims ove	r onginal patent				. , ,		
	leissue cizim In excess of 20 and over original	pátent			•••			
SUBTOTAL (2) (8) 194 "or number previously paid, if greater, For Reissues, see above.			SUBTOTAL (3) (5) * Reduced by Basic Filing Fee Paid					
			Complete (if applicable)					
Name (PrintType) David G. Dolezal			Part 4- No. 1 44 744					
Name (Print/Type) David G	. Dulezei		1		71,7		Telephone Telephone	
Signature Date 1/3/01								